

County of \_\_\_\_\_

Index No.: \_\_\_\_\_

Part

in the matter of the Application of

\_\_\_\_\_

to prosecute as a poor person against

\_\_\_\_\_

State of New York, County of \_\_\_\_\_ ss:

AFFIDAVIT IN SUPPORT OF  
AN APPLICATION TO PROCEED  
AS A POOR PERSON  
AND AUTHORIZING THE STATE  
TO PAY THE COSTS  
FOR THE PRODUCTION OF  
A STENOGRAPHIC TRANSCRIPT

\_\_\_\_\_, being duly sworn, deposes and says:

1. I am the party named as \_\_\_\_\_ in the above titled action.

2. The case was tried before Judge \_\_\_\_\_.

3. I request that an Order be granted:

**AUTHORIZING THE STATE TO PAY THE COSTS FOR THE STENOGRAPHIC TRANSCRIPT.**

The estimate\* of the costs for the production of the transcript is \$ \_\_\_\_\_

*[\*Attach estimate(s) and total them if more than one.]*

*If no Notice of Appeal is to be filed, but a request for the State to pay the costs for the production of a transcript is being submitted, please state why the transcript is needed \_\_\_\_\_.*

4. I make this application based on CPLR §1101. I do not have, nor am I able to obtain, the funds needed to file a Notice of Appeal and/or to pay for the stenographic transcript. I will be unable to proceed unless the Order is granted.

5. I am/am not a recipient of Public Assistance from the Department of Social Services of the City of New York.  
*(strike one).*

6. I have no income other than the sum of \$ \_\_\_\_\_ per \_\_\_\_\_ from \_\_\_\_\_.

7. I own no property of any kind except necessary personal wearing apparel and \_\_\_\_\_.

8. No other person is beneficially interested in the recovery sought.

9.  a) I have not made a previous application for this or similar relief

b) I have made previous application(s) for this or similar relief, but I am making this further application

because \_\_\_\_\_

Sworn to before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_ -- Sign your name \_\_\_\_\_

\_\_\_\_\_  
Signature of Court Employee and Title

Print your address  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_